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Substitute for form 1449A/PTO

Sheet 1

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete ii Known				
Application Number	10/555,071			
Filing Date	NOVEMBER 12, 2007			
First Named Inventor	RON GOLAN			
Art Unit	2854			
Examiner Name	UNKNOWN			
Attorney Docket Number	R&R-137-US			

U. S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (Kecoun)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	1	us-5,259,907 A	11/09/1993	SOULES ET AL.	
	2	us-6,179,338 B1	01/30/2001	BERGMANN ET AL.	
	3	us- US2002/0063744 A1	05/30/2002	STEPHENS, JR.	
		US-			
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FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ "Number ⁴ "Kind Code ⁶ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	т°
	4	WO 97/20298 A1	06/05/1997	GRAPHIC SECURITY SYSTEMS CORP.	O TOTALLY IGNORATION	
	5	EP 1 345 193 A3	09/17/2003	JURA-TRADE KERESKEDELMI KFT		
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This calculation of information is required by 37 CFR 1.07 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to proceed) an application. Confidentiality is operated by 38 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to Exposure to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this builder, should be sent to the Chief Information Oliver, U.S. Patient and Trademark Office, P.O. Box 1450, Alexandria, V.B. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. JEBU TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.B. 22313-1450.

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Attorney Docket Number

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		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where publisher.	T
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